

HEALTH FACILITY CONSTRUCTION FREQUENTLY ASKED QUESTIONS

ADMINISTRATIVE

1. When will the 2007 California Building Standards Code, Title 24 become effective?

It is anticipated that the new 2007 California Building Code, 2007 California Electrical Code, 2007 California Mechanical Code, 2007 California Plumbing Code and 2007 California Fire Code will become effective in January 2008. When the actual effective date is known, it will be published on the OSHPD website and in Code Application Notice (CAN) 1 at: www.oshpd.ca.gov/FDD/Regulations/CANS/Can-1.pdf

2. What is OSHPD's policy on allowing compliance with the 2007 California Building Standards Code, Title 24, prior to its effective date?

OSHPD will allow compliance with the 2007 California Building Standards Code, Title 24, prior to its effective date, as an Alternate Method of Compliance. Projects must comply with the **entire** 2007 California Building Standards Code, including the 2007 California Building Standards Administrative Code, 2007 California Building Code, 2007 California Electrical Code, 2007 California Mechanical Code, 2007 California Plumbing Code, and 2007 California Fire Code. An Alternate Method of Compliance must be submitted to OSHPD prior to the submission of plans. Design professionals and facility owners wishing to comply with the 2007 California Building Standards Code must submit preliminary plans and outline specifications or final plans and specifications that comply with the 2007 California Building Standards Administrative Code.

Design professionals and facility owners wishing to comply with a **specific** 2007 code or subject matter within a 2007 code (i.e. structural requirements of the 2007 California Building Code) must submit an Alternate Method of Compliance request to OSHPD. Approvals will be decided on a case-by-case basis.

Projects based on the 2007 codes will require longer OSHPD plan review turnaround times dependent upon the publication date and the availability of the codes.

Design professionals and facility owners wishing to lock-in compliance with the 2001 Building Standards Code prior to the effective date of the 2007 California Building Standards Code must submit to OSHPD preliminary plans and outline specifications or final plans and specifications in accordance with the 2001 California Building Standards Code prior to the effective date of the 2007 codes.

3. If a project is submitted under the applicable governing codes but a newer edition of a code is available, can we pick and choose portions of a code?

No. The project must comply with all governing codes in effect when a Preliminary or Final Application for Plan Review is submitted to the Office. Please refer to Code Application Notice (CAN) 1: www.oshpd.ca.gov/FDD/Regulations/CANS/Can-1.pdf.

4. What OSHPD procedure should be used when an architect or engineer disagrees with an OSHPD plan review staff member or an OSHPD field staff member on a code interpretation?

OSHPD's clients should use the Comment and Process Review (CPR) procedure to resolve disagreements involving code interpretation issues or OSHPD processes/procedures. For more information please refer to: www.oshpd.ca.gov/FDD/PlanReview/CPR.htm.

5. What is required of a skilled nursing facility (SNF) for the temporary voluntary conversion of all or a portion of its licensed bed capacity for the purpose of using the facility as a licensed Mental Health Rehabilitation Center (MHRC)?

In 2004, legislation was passed that spells out the requirements. Please refer to Senate Bill 1745 (Chapter 509, Statutes of 2004) at: www.oshpd.ca.gov/FDD/FAQ/SB_1745.pdf.

6. Are any construction projects for hospitals and skilled nursing facilities exempt from the OSHPD plan review process?

Recent legislation has been passed which provides that, under specific circumstances, a hospital or skilled nursing facility project may be exempt from the OSHPD plan review process.

Assembly Bill 2632 (Chapter 453, Statutes of 2004) and Senate Bill 224 (Chapter 494, Statutes of 2005), both allow certain maintenance and repair work projects for hospitals and skilled nursing facilities to be exempt from plan review, if specific criteria is met. AB 2632 provisions apply to such projects in "single-story" buildings and SB 224 provisions apply to "multi-story" buildings.

For information regarding AB 2632 requirements please refer to: www.oshpd.ca.gov/FDD/PlanReview/AB2632.htm

For information regarding SB224 requirements please refer to: www.oshpd.ca.gov/FDD/PlanReview/SB224.htm

In addition, Senate Bill 1838 (Chapter 693, Statutes of 2006), which became effective January 1, 2007, allows hospital, skilled nursing facility and intermediate care facility construction or alteration projects costing less than \$50,000 to be exempt from the OSHPD plan review process, if specific criteria are met. OSHPD's Policy Intent Notice (PIN) 36 outlines the process and procedures for submittal of such projects.

For information regarding SB 1838 requirements please refer to:
www.oshpd.ca.gov/FDD/Regulations/PINS/pin-36.pdf

Although projects that meet the criteria for AB 2632, SB 224 or SB 1838 are exempt from the OSHPD plan review process, **they are not exempt from issuance of a building permit and construction observation by OSHPD.**

7. Are there other types of project exemptions besides those described for AB 2632, SB 224 and SB 1838 under Question #6?

OSHPD's *Field Reviewed Projects, Exempt Projects & Expedited Review Projects Manual* (FREER Manual) provides a guide to help identify the other types of projects that may be considered "exempt". Projects that are identified as "exempt" will not require submittal of a building permit application, project plans or a fee. However, the exemption will not preclude the project from OSHPD field observation necessary to assure code compliance. Please refer to the FREER Manual:
www.oshpd.ca.gov/FDD/PlanReview/Documents/FREER.PDF.

8. Why does the application form for OSHPD plan review request the name of a "Facility Representative"?

Upon the recommendation of the hospital industry, OSHPD requests that hospitals and skilled nursing facilities identify a "facility representative" who will receive copies of all project correspondence from the OSHPD and who will be the contact person when discussion of plan review or construction issues is necessary. This provides facilities easier access to information about the review of their projects and reduces confusion regarding the status of the reviews. When projects are received by OSHPD, the name of the facility representative, if identified, is entered into the project logbook database and this information is used for sending all correspondence to that individual. If this information is not provided, the "facility administrator" will receive copies of all correspondence.

9. Can a licensed specialty contractor prepare plans and specifications for a project consisting only of a fire sprinkler system?

Yes, if the sprinkler piping does not exceed 2.5 inches in diameter. Project plans only need to be stamped by the licensed specialty C-16 contractor. Please refer to Title 24, Part 1, Section 7-115 (c): www.oshpd.ca.gov/fdd/Regulations/part1.pdf.

10. What are the stamping and signature requirements for a fire sprinkler system deferred submittal?

Stamping and signature requirements must comply with Title 24, Part 1, Section 7-115 (a) & (b) and Section 7-153 (d). Please refer to:
www.oshpd.ca.gov/fdd/Regulations/part1.pdf.

11. Who is responsible for updating the Testing, Inspection & Observation (TIO) Program for a specific project?

The architect or engineer in responsible charge of the work must maintain the TIO Program, pursuant to Title 24, Part 1, Section 7-141 (d). Please refer to: www.oshpd.ca.gov/fdd/Regulations/part1.pdf.

12. Does OSHPD have a special form or letter for submitting an Alternate Method of Compliance request?

OSHPD prefers that Alternate Method of Compliance requests are submitted on form OSH-FD-126 which is available at the following link: www.oshpd.ca.gov/FDD/Forms/AltMethodCompliance.pdf.

13. What are the code requirements for CHEMPACK containers located within hospital buildings?

The CHEMPACK Program is a voluntary component of the federal Strategic National Stockpile Program (SNS) operated by the Centers for Disease Control and Prevention (CDC). The CHEMPACK Program places numerous caches of nerve agent antidotes throughout the state to assist local medical personnel in their response to a nerve agent terrorist attack or large pesticide exposure. To accomplish this goal, CHEMPACK containers are strategically positioned throughout the country. Most CHEMPACK container installations will require minor construction work. Any construction or modification of the hospital building that is needed to accommodate a CHEMPACK location must meet the requirements of Title 24, California Building Standards Code and plans for this work must be reviewed and approved by OSHPD. The work may include, but not be limited to, construction of rooms or enclosures for the CHEMPACK containers, installation of seismic restraints for the containers, addition or relocation of electrical or telephone outlets, installation of security devices, modification of HVAC systems, or replacement of door hardware. All work must comply with the applicable requirements of the California Building Standards Code. For anchorage requirements of CHEMPACK containers, please refer to FAQ - Structural Category, Question No. 1.